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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number

Filing Date

First Named Inventor

Kevin Xie

Group Art Unit

Examiner Name

Total Number of Pages in This Submission 20

Attorney Docket Number

PLI-1013



ENCLOSURES (check all that apply)

☒ Fee Transmittal Form

☒ Fee Attached

☐ Amendment / Reply

☐ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)

☐ Response to Missing Parts/ Incomplete Application

☐ Response to Missing Parts under 37 CFR 1.52 or 1.53

☐ Assignment Papers (for an Application)

☐ Drawing(s)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a Provisional Application

☐ Power of Attorney, Revocation Change of Correspondence Address

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ After Allowance Communication to Group

☐ Appeal Communication to Board of Appeals and Interferences

☐ Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☐ Other Enclosure(s) (please identify below):

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

Albert O. Cota

Signature

Albert O. Cota
12/20/01

Date

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: 12-20-01

Typed or printed name

Martha T. Cota

Signature

Martha T. Cota

Date

12-20-01

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**FEE TRANSMITTAL
for FY 2001**

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) 370.00

Complete if Known

| | |
|----------------------|-----------|
| Application Number | |
| Filing Date | |
| First Named Inventor | Kevin Xie |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | PLI-1013 |

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number

Deposit Account Name

- ☐ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

- ☒ Applicant claims small entity status See 37 CFR 1.27

2. Payment Enclosed:

- ☒ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity | Small Entity | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|--------------|--------------|---------------|---------------|------------------------|----------|
| 101 | 710 | 201 | 355 | Utility filing fee | 370. |
| 106 | 320 | 206 | 160 | Design filing fee | |
| 107 | 490 | 207 | 245 | Plant filing fee | |
| 108 | 710 | 208 | 355 | Reissue filing fee | |
| 114 | 150 | 214 | 75 | Provisional filing fee | |

SUBTOTAL (1) (\$) 370.00

2. EXTRA CLAIM FEES

| Total Claims | Extra Claims | Fee from below | Fee Paid |
|--------------------|--------------|----------------|----------|
| Independent Claims | -20** = | X | |
| Multiple Dependent | -3** = | X | |

Large Entity Small Entity

| Fee Code (\$) | Fee Code (\$) | Fee Code (\$) | Fee Description |
|---------------|---------------|---------------|--|
| 103 | 18 | 203 | 9 Claims in excess of 20 |
| 102 | 80 | 202 | 40 Independent claims in excess of 3 |
| 104 | 270 | 204 | 135 Multiple dependent claims, if not paid |
| 109 | 80 | 209 | 40 ** Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$)

**or number previously paid. If greater. For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

| Large Entity | Small Entity | Fee Code (\$) | Fee Code (\$) | Fee Description | Fee Paid |
|--------------|--------------|---------------|---------------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 390 | 216 | 195 | Extension for reply within second month | |
| 117 | 890 | 217 | 445 | Extension for reply within third month | |
| 118 | 1,390 | 218 | 895 | Extension for reply within fourth month | |
| 128 | 1,890 | 228 | 945 | Extension for reply within fifth month | |
| 119 | 310 | 219 | 155 | Notice of Appeal | |
| 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | |
| 121 | 270 | 221 | 135 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,240 | 241 | 620 | Petition to revive - unintentional | |
| 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) | |
| 143 | 440 | 243 | 220 | Design issue fee | |
| 144 | 600 | 244 | 300 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(c) | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Sheet | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

SUBMITTED BY

Name (Print/Type)

Albert O. Cota

Registration No.
(Attorney/Agent)

29,291

Complete (if applicable)

Telephone

(818) 368-4332

Signature

Albert O. Cota

Date

12/20/01

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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